

SHBP PDC RESOLUTION #2022-6

RESOLUTION OF THE STATE HEALTH BENEFITS PROGRAM PLAN DESIGN COMMITTEE TO INCREASE THE COPAYMENT FOR SPECIALIST OFFICE VISITS

WHEREAS, pursuant to N.J.S.A. 52:14-17.25 to -17.46a, the State Health Benefits Program (SHBP) provides health coverage to qualified employees and retirees of the State of New Jersey (State) and participating local employers; and

WHEREAS, the SHBP was created in 1961 to provide affordable health care coverage for public employees on a cost-effective basis; and

WHEREAS, all SHBP plans, with the exception of Medicare Advantage plans, are self-funded, which means the money paid out for benefits comes directly from a SHBP fund supplied by the State, participating local employers, and member premiums; and

WHEREAS, the costs for health and prescription drug benefits continue to increase exponentially, which has strained the budgets of the State and local employers and caused increased costs to members; and

WHEREAS, on August 11, 2022, Aon Consulting Inc., the health care consultant for the SHBP, recommended certain plan design changes to the SHBP Plan Design Committee including an increase in specialist office visit copayments; and

WHEREAS, the SHBP Plan Design Committee recognizes a differential between primary care office visit copayments and specialist office visit copayments is common for both public and private health plans; and

WHEREAS, while the SHBP Plan Design Committee recognizes specialists are an integral part of medical treatment, keep patients healthier, and extend or save lives, proper primary care provider medical management saves money by avoiding repeat visits to more costly specialists; and

WHEREAS, the SHBP Plan Design Committee recognizes an increase in specialist office visit copayments may encourage members to engage with their existing primary care provider to manage chronic conditions, which may be better suited for medical management in the primary care setting; and

WHEREAS, pursuant to N.J.S.A. 52:14-17.29(D), the SHBP Plan Design Committee finds it in the best interest of the State, local employers, and members to incentivize members to engage with their primary care provider by increasing the copayment for specialist office visits.

NOW THEREFORE, BE IT RESOLVED AS FOLLOWS:

1. The specialist office visit copayment for State active members enrolled in the CWA Unity, CWA Unity 2019, NJDIRECT, and NJDIRECT 2019 PPO plans, the HMO plans, and the tiered network plan shall be \$15 more than the copayment for a primary care office visit.
2. This Resolution shall not apply to obstetric or gynecology specialist office visit copayments.
3. This Resolution shall not apply to early or Medicare eligible retirees.

2022-6 Specialist Copayments

4. The Committee requests the State Health Benefits Commission and/or Division of Pensions and Benefits take appropriate action with the SHBP's third-party administrator to implement this Resolution.
5. This provision shall become effective for Plan Year 2023.
6. This provision shall be permanent and may only be amended or terminated thereafter by an affirmative majority vote of the Committee.

DATED: September 14, 2022

SHBP PDC RESOLUTION #2022-6 APPENDIX

State and Local Government Actives	CWA Unity / NJDIRECT¹	HMO 10	HMO 15	OMNIA Tier 1	OMNIA Tier 2
Current Copays					
PCP	\$15.00	\$10.00	\$15.00	\$5.00	\$20.00
Specialist	\$15.00	\$10.00	\$15.00	\$15.00	\$30.00
Copays effective PY2023					
PCP	\$15.00	\$10.00	\$15.00	\$5.00	\$20.00
Specialist ²	\$30.00	\$25.00	\$30.00	\$20.00	\$35.00

1. Includes the CWA Unity 2019 and NJDIRECT 2019 plan options.
2. The specialist office visit copayments is assumed to apply to services currently subject to a specialist copayment including physical therapy, acupuncture, and chiropractic services.